# COMMUNITY HEALTH SERVICES AUGUST 2010

#### **Communicable Disease:**

Johnnanicable Disease.		Aug 09-													
Communicable Disease		Jul 10													
Correction and Discuss		12 Mb.	12 Mb.									_			
	-10	Running	Running	0	10	-10	10	-10	10	10	60	8	60	60	60
	Aug-10	Avg.	Total	Jul-10	Jun-10	Way-10	Apr-10	War-10	Feb-10	Jan-10	Dec-09	Nov-09	00 <del>1</del> 00	Sep-09	Aug-09
 Amebiasis	1	1.0	1		_	1	1		ш	Ĩ				S	/
Campylobacteriosisis	3	2.0	8	3			1	2							2
Cryptosporidiosis	2	2.0	20	2	1	3		1	1	1	1	1	1		8
Dengue Fever**	1	2.0	20												0
Shiga toxin-producing															
Escherichia coli (STEC)															
0157:H7		1.0	1		1										
Shiga toxin-producing		1.0													
Escherichia coli (STEC)		1.0	4	1						1		1	1		
Giardiasis	3	1.4	11		2			1	3	1		1	1	1	1
Hepatitis A		1.0	1					1							
Legionellosis		1.0	2		1							1			
Lyme Disease		1.0	1	1											
Meningitis-aseptic	2	1.0	1	1											
Meningitis-viral	1	1.0	2	1										1	
Pertussis***		2.3	7								1		5	1	
Rabies (animal)		1.5	3											1	2
Salmonellosis	2	1.6	8	3	1		1	2							1
Shigellosis	1														
Varicella (chickenpox) *		9.7	87	7	16	12	4	12	19	13	2			2	
Vibrio parahaemolyticus	1		0												
Yersinosis		1.0	1		1										
Month total 16 19 23 16 6 19 23 16 4 4 8 6 14										14					
* includes confirmed, probable, and suspect cases; most cases meet probable case definition															
**out of country exposure															
***pertussis case deleted per reconcilation, did not meet case definition															

### COMMUNITY HEALTH SERVICES AUGUST 2010

#### **IMMUNIZATIONS:**

		Aug-09 th	ru Jul-10												l
IMMUNIZATIONS															
		12 Mo.	12 Mo.												
	Aug-	Running	Running			May-	Apr-	Mar-	Feb-	Jan-	Dec-	Nov-	Oct-	Sep-	Aug-
	10	Avg.	Total	Jul-10	Jun-10	10	10	10	10	10	09	09	09	09	09
Clients	730	412.917	4955	382	391	439	333	271	288	375	252	347	441	961	475
Immunizations	1375	709.417	8513	670	662	879	642	438	494	536	368	570	703	1736	815
Influenza	14	463.9	4639	0		3	10	25	122	850	899	1498	1231	1	
Titers	30	12	72	12	16	12	15	6	11						

<sup>-</sup>Immunization data includes travel immunizations.

#### **Maternal Child Health:**

MCH									
	10-Aug	Running Avg.	Running Total	10-Jul	10-May	10-Apr	Mar-10	Feb-10	Jan-10
Home Visiting (HV)									
Visits Mother	86	95.3333	572	91	68	122	144	86	61
Visits Child	31	30	150	28	*53	36	36	33	17
Total Visits		129.167	775	119	121	158	180	119	78
Intensive HV									
Visits Mother	12	18.8	94	28	19	16	16		15
Visits Child	10	12.4	62	17	8	14	8		15
Total Visits		32.3333	194	45	27	30	24	38	30
Dietician									
Visits Mother	7	6.2	31	6	4	3	9	9	
Visits Child									

<sup>-</sup>Does not include telephone encounters or calls for team management of clients

<sup>-</sup>Each month 80-100 doses of VFC hepatitis B vaccine are provided via FCCHD to the hospitals to administer to newborns. These doses were being recorded under FCCHD immunizations and clients. The doses are <u>not</u> included in the data beginning December 2009.

<sup>-</sup>Blood titers for verification of immunity are drawn by appointment for vaccine preventable diseases.

<sup>-</sup>Services provided to at risk pregnant women and children by a public health nurse, social worker or dietician. Appointments may take place in the home, office or at a designated meeting site.

<sup>-</sup>The initial visit with a pregnant woman may include assistance with applying for presumptive Medicaid eligibility.

<sup>-</sup>All maternity clients have the option of referral to the dietician for an assessment and nutrition education.

<sup>-</sup>Coordination and participation in FICMR (fetal infant child mortality review team)

# COMMUNITY HEALTH SERVICES AUGUST 2010

#### WIC:

WIC		Jul-09 - Ju	ın-10												
	10-Jul	12 Mo. Running Avg.	12 Mo. Running Total	Jun-10	May-10	Apr-10	Mar-10	Feb- 10	Jan- 10	Dec- 10	Nov- 09	Oct- 09	Sep- 09	Aug- 09	Jul- 09
Columbia															
Falls	171	195.1	2341	171	182	191	186	184	199	196	210	206	188	197	231
Kalispell	1429	1432.5	17734	1436	1509	1487	1477	1364	1681	1644	1474	1496	1378	1359	1429
Total	1600	1672.9	20075	1607	1691	1678	1663	1548	1880	1840	1684	1702	1566	1556	1660

<sup>\*</sup>Farmers market coupon program underway for summer 2010

Respectfully Submitted,

Jody Beth White, RN, BSN



### Flathead City-County Board of Health

1035 First Ave. West Kalispell, MT 59901 (406) 751-8101 FAX 751-8102 www.flatheadhealth.org Community Health Services 751-8110 FAX 751-8111 Environmental Health Services 751-8130 FAX 751-8131 Reproductive Health Services 751-8150 FAX 751-8151 Home Health Services 751-6800 FAX 751-6807 WIC Services 751-8170 FAX 751-8171

July 27, 2010

Name School Address

Dear:

Montana's immunization rates in school-aged children are alarmingly low. Montana's rates as compared to overall national rates are low and we failed to meet the Healthy People 2010 objective of 90% immunization coverage.

As you know, Montana Law requires all children enrolling in school to meet the immunization requirements of 20-5-403, MCA. That is, all newly enrolled students must show proof of current immunization status, a religious exemption or a conditional attendance form upon registration. In addition, students entering the seventh grade must have a Td or Tdap booster (tetanus, diphtheria and pertussis). Failure to comply must result in the pupil's exclusion from school.

This is not just an obligatory process. Unimmunized children pose a risk to themselves and others in your school and in the community. Immunization is our greatest defense to stop the transmission of disease in this vulnerable population.

We can and will increase immunization rates in Flathead County with your assistance. All we will ask of you and your school system is strict compliance with the Laws of Montana. In Flathead County we have some Districts that have been outstanding with regards to compliance with Montana's immunization laws while others have fallen drastically short.

Attached you will find information regarding this matter. Our staff will be in contact with you soon to discuss your District's status regarding compliance with Montana's immunization laws. If you have any questions you may call Jody White, Community Health Services Director at 751-8110.

Sincerely,

Glen Aasheim, MD Board of Health Chairman Joseph W. Russell, MPH Health Officer

Attachments

#### Per MCA and ARM (abbreviated) regarding local Boards of Health:

MCA 50-2-116. Powers and duties of local boards of health. (1) In order to carry out the purposes of the public health system, in collaboration with federal, state, and local partners, each local board of health shall:

. . . . .

- (f) identify, assess, prevent, and ameliorate conditions of public health importance through:
  - (i) epidemiological tracking and investigation;
  - (ii) screening and testing;
  - (iii) isolation and quarantine measures;
  - (iv) diagnosis, treatment, and case management;
  - (v) abatement of public health nuisances;
  - (vi) inspections;
  - (vii) collecting and maintaining health information;
  - (viii) education and training of health professionals; or
  - (ix) other public health measures as allowed by law;
- (g) protect the public from the introduction and spread of communicable disease or other conditions of public health importance, including through actions to ensure the removal of filth or other contaminants that might cause disease or adversely affect public health;
- (h) supervise or make inspections for conditions of public health importance and issue written orders for compliance or for correction, destruction, or removal of the conditions:
- (i) bring and pursue actions and issue orders necessary to abate, restrain, or prosecute the violation of public health laws, rules, and local regulations;

. . . . . . . .

(3) A local board of health may provide, implement, facilitate, or encourage other public health services and functions as considered reasonable and necessary.

#### ARM 37.114.102 LOCAL BOARD RULES

(1) A local board of health may adopt rules for the control of communicable diseases, if such rules are as stringent as and do not conflict with the requirements of this chapter.

#### Per ARM (abbreviated) Montana Schools shall adhere to the following:

#### 10.55.909 STUDENT RECORDS

(1) Each school shall keep, in secure storage, a permanent file of students' records, that shall include:

. . . . . .

- (f) immunization records as per 20-5-406, MCA; and
- (2) The board of trustees shall establish policies and procedures for the use and transfer of student records that are in compliance with state and federal laws governing individual privacy. All educational records collected and maintained by a school shall be kept in a confidential manner according to the implementing regulations of the Family Educational Rights and Privacy Act (FERPA) at 34 CFR part 99.

## <u>20-5-403. IMMUNIZATION REQUIRED- RELEASE AND ACCEPTANCE OF IMMUNIZATION RECORDS.</u>

- (1) The governing authority of any school other than a postsecondary school may not allow a person to attend as a pupil unless the person:
- (a) has been immunized against diphtheria, pertussis, tetanus, poliomyelitis, rubella, mumps, and measles (rubeola) in the manner and with immunizing agents approved by the department, except that pertussis vaccination is not required for a person 7 years of age or older;
- (b) has been immunized against Haemophilus influenza type "b" before enrolling in a preschool if under 5 years of age;
  - (c) qualifies for conditional attendance; or
  - (d) files for an exemption.
- (2) (a) The governing authority of a postsecondary school may not allow a person to attend as a pupil unless the person:
- (i) has been immunized against rubella and measles (rubeola) in the manner and with immunizing agents approved by the department; or
  - (ii) files for an exemption.
- (b) The governing authority of a postsecondary school may impose immunization requirements as a condition of attendance that are more stringent than those required by this part.
- (3) A pupil who transfers from one school district to another may photocopy immunization records in the possession of the school of origin. The school district to which a pupil transfers shall accept the photocopy as evidence of immunization. Within 30 days after a transferring pupil ceases attendance at the school of origin, the school shall retain a certified copy for the permanent record and send the original immunization records for the pupil to the school district to which the pupil transfers.

### 20-5-406. IMMUNIZATION RECORD

The governing authority of each school shall require written evidence of each pupil's immunization against the diseases listed in <u>20-5-403</u> and shall record the immunization of each pupil as part of the pupil's permanent school record on a form prescribed by the department.

## <u>37.114.703 REQUIREMENTS FOR ADEQUATE DOCUMENTATION OF IMMUNIZATION STATUS</u>

- (1) The following are considered adequate documentation of immunization for the purposes of this subchapter, subject to the restriction in (2):
- (a) a record from any local health department in the United States, signed by a local health officer or nurse;
  - (b) a certificate signed by a local health officer or nurse;
- (c) any immunization record, if information has been recorded and signed or stamped by a physician, physician's designee, local health officer, or that officer's designee;
  - (d) a form approved by the U.S. federal government;
  - (e) any state's official parent maintained immunization record;
- (f) the international certificates of vaccination approved by the world health organization;
  - (g) the conditional enrollment form prescribed by the department;
  - (h) documentation of a medical exemption signed by a physician;
- (i) documentation of a religious exemption, signed and notarized at the start of each school year, or, in a postsecondary setting, each year beginning with the date the pupil commences attendance; or
- (j) in the case of vaccine administered outside of the United States, a record of the vaccination signed by an official of the principal public health agency of the country where the vaccination occurred.
- (2) Vaccine administration data may not be filled out by a parent, guardian or other person unless they are a physician, health department official or person otherwise authorized to do so by this subchapter.

# 37.114.705 REQUIREMENTS FOR UNCONDITIONAL ATTENDANCE AT A SCHOOL OFFERING ANY PORTION OF GRADES KINDERGARTEN THROUGH 12

- (1) Before a prospective pupil may unconditionally attend a Montana school offering any portion of kindergarten through grade 12, that school must be provided with adequate documentation that the prospective pupil has been immunized through administration of the vaccines and on the schedules specified in this rule.
- (2) Vaccines immunizing against diphtheria, pertussis, and tetanus must be administered as follows:
- (a) A pupil or prospective pupil less than seven years of age must be administered four or more doses of DTP or DTAP vaccine, at least one dose of which must be given after the fourth birthday;
- (b) A pupil or prospective pupil seven years old or older who has not completed the requirement in (2)(a) must receive additional doses of Td vaccine to reach a minimum of

three doses of any combination of DTP, DTAP, DT or Td. Pertussis vaccine is not required for a pupil seven years of age or older;

- (c) Beginning with the 2006-2007 school year, prior to entering the seventh grade, a pupil must receive a dose of vaccine containing Td if the following criteria are met:
- (i) at least a five year interval must have passed since the pupil's previous doses of DTP, DTaP, DT or Td;
  - (ii) the pupil is 11 years of age or older; or
  - (iii) a dose of Td was not given to the pupil at seven years of age or older;
- (d) If a pupil enters the seventh grade before reaching 11 years of age, a booster shot of Td must be administered to the pupil as soon as possible after the pupil attains that age, unless the pupil already was administered a dose of Td at seven years of age or older;
- (e) DT vaccine administered to pupils less than seven years of age is acceptable only if accompanied by a medical exemption that exempts the pupil from pertussis vaccination.
- (3) Polio vaccine must be administered to a prospective pupil in three or more doses of trivalent poliomyelitis vaccine, at least one dose of which must be given after the fourth birthday.
- (4) Beginning with the 2005-2006 school year, the following pupils must have received two doses of live measles, mumps and rubella vaccine at/or after 12 months of age, separated by at least one month between doses:
- (a) a pupil entering kindergarten, or, in the case of a school with no kindergarten, first grade; or
- (b) a pupil entering any grade from seventh grade to twelfth grade who has not already received the two required doses.

# 37.114.708 DOCUMENTATION OF IMMUNIZATION STATUS OF PERSONS COMMENCING ATTENDANCE IN PRESCHOOL OR KINDERGARTEN THROUGH GRADE 12

- (1) A school must obtain and keep the following immunization data for each pupil on HES 101 after receiving adequate documentation of:
  - (a) legal name;
  - (b) birthdate;
  - (c) sex; and
  - (d) the vaccination date (month, day and year) of each vaccine administered.
- (2) HES 101 may be accepted by the school without reference to other adequate documentation if:
- (a) sections I and II are completed and signed by a physician, local health department official or the designee of either; and
  - (b) section IV is signed by a physician.
- (3) If the information required by (1) has not been provided to the school on HES 101:
- (a) immunization data must be transferred onto HES 101 from adequate documentation:
- (b) sections I and II of HES 101 must be signed and dated by a school official or the official's designee; and

(c) beginning with pupils entering a Montana school for the first time during or after the 2005-2006 school year, a copy of the adequate documentation must be attached to HES 101.

# 37.114.710 REQUIREMENTS FOR CONDITIONAL ENROLLMENT IN A PRESCHOOL OR A SCHOOL OFFERING ANY PORTION OF KINDERGARTEN THROUGH GRADE 12

- (1) A prospective pupil who does not meet school immunization entry requirements for a preschool or a school offering any portion of kindergarten through grade 12 may be admitted to school under the following conditions:
- (a) A physician or local health department must indicate on the department's conditional attendance form that immunization of the prospective pupil has already been initiated by the prospective pupil receiving, at a minimum, one dose of each of the vaccines required in ARM <u>37.114.705</u>. If a prospective pupil is exempt from any of the foregoing vaccinations, the requirements of this rule apply to the remaining immunizations for which no exemption exists.
- (b) The conditional attendance form must include the date each dose of the required vaccines are to be administered, the signature of the physician, the physician's designee or the school or public health official who established the foregoing immunization schedule, and the signature of a parent or guardian acknowledging the immunization schedule; and
- (c) The parent or guardian must return the form to the school before the prospective pupil may attend.
- (2) The conditional attendance form prescribed by the department must be used to document conditional attendance status and must be retained in the pupil's school record.
- (3) If the pupil who is attending school conditionally fails to receive vaccines on the date they are due, as stated on the conditional exemption form, the pupil must:
  - (a) be vaccinated;
- (b) qualify for and claim an exemption from the immunizations not received and documented; or
- (c) be excluded immediately from school by the school administrator or by their designee.
- (4) A pupil who is excluded from school due to failure to meet the requirements of the conditional exemption may return to school only after the school receives the required documentation that the pupil has been administered the vaccines that were due according to the immunization schedule on the conditional form. If additional immunizations are still required, a physician, physician's designee or the school or public health official must reestablish the schedule as stated in (1)(b).

#### 37.114.715 MEDICAL EXEMPTION

(1) A prospective pupil seeking to attend school is not required to have any immunizations which are medically contraindicated. A written and signed statement from a physician that an immunization is medically contraindicated will exempt a prospective pupil from those immunization requirements as deemed necessary by the physician. The required vaccines are listed in <u>20-5-403</u>, MCA.

- (2) The statement must include:
- (a) which specific immunization is contraindicated;
- (b) the period of time during which the immunization is contraindicated;
- (c) the reasons for the medical contraindication; and
- (d) when deemed necessary by a physician, the results of immunity testing performed on a pupil entering kindergarten through grade 12. The tests must indicate serological evidence of immunity and must be performed by a CLIA approved lab. A copy of the test result must be attached to HES 101, beginning with school enterers in school year 2005-2006.
- (3) It is preferred, but not mandatory, that a physician's medical exemption be recorded on HES 101.
- (4) The physician's written statement must be maintained by the school as part of the immunization record of the pupil qualifying for the exemption. In preschool and kindergarten through grade 12 settings, the written statement must be attached to the HES 101 beginning with the 2005-2006 school year.

#### 37.114.716 RELIGIOUS EXEMPTION

- (1) A prospective pupil seeking to attend school is exempt from all or part of the immunization requirements if the parent or guardian of that prospective pupil, an adult responsible for that prospective pupil, or the prospective pupil if an adult or an emancipated minor, objects thereto in a signed, written statement indicating that the proposed immunization interferes with the free exercise of the religious beliefs of the person signing the statement.
- (2) In any school other than a postsecondary school, a claim of exemption from immunization requirements on religious grounds must be notarized annually and maintained on a form HES 113, Affidavit of Exemption on Religious Grounds, provided by the department. The form must be provided to the school prior to each school year by the parent, guardian or adult responsible for the pupil. If the pupil is 18 years of age or older or emancipated, the pupil may claim the exemption.
- (3) In a postsecondary setting, a religious exemption must be maintained on form HES 113 and signed, notarized and submitted each year of attendance, beginning with the date of initial attendance at the school. The form must be completed and resubmitted each year thereafter.
- (4) The original copy of the claim of religious exemption must be kept by the school as part of the pupil's school record.

#### 37.114.720 REPORT OF IMMUNIZATION STATUS

- (1) A report of the immunization status of the pupils in every school must be sent each year to the department by the school's governing authority or designee on a form provided by the department.
- (2) The report must include the immunization status of all pupils and must be submitted by December 1 of each school year.
- (3) A copy of the report must be sent concurrently from the school to the local health department, or, if there is no local health department, to the local board of health or local health officer.

(4) The school must keep a record of any change in immunization status of a pupil from that stated on the report. Such records must be available upon request to the department or local health authority.

## 37.114.721 REPORT OF NONCOMPLIANCE FOR KINDERGARTEN THROUGH GRADE 12

- (1) If a pupil is excluded from a school offering kindergarten through grade 12 due to the failure to meet the requirements for conditional enrollment in ARM <u>37.114.710</u>, the school must notify by the end of the third day following the exclusion, by U.S. mail, the following:
  - (a) the local health officer; and
- (b) the Department of Public Health and Human Services, Public Health and Safety Division, Communicable Disease Control and Prevention Bureau, Immunization Section, 1400 Broadway, P.O. Box 202951, Helena, MT 59620-2951, telephone: (406)444-4735 or (406)444-5580.
- (2) If adequate documentation has been provided prior to the end of the three days, notification is not necessary.
- (3) Concurrent telephone notification of either or both of the above agencies is encouraged but not required.
  - (4) The notification must include:
  - (a) the name of the excluded person;
  - (b) his or her address;
  - (c) the name of the parents, guardian or responsible adult; and
  - (d) the date of exclusion.
- (5) Written documentation of that notification must be placed in the school file, if any, of the pupil excluded, or in a special file established for such documentation, if the pupil has no school file. Such documentation must include the information noted in (4), date of mailing, and name of the individual giving the notification.

References:	
http://www.m	ntrules.org/

### DEPARTMENT OF PUBLIC HEALTH AND HUMAN SERVICES **IMMUNIZATION PROGRAM**

**BRIAN SCHWEITZER** GOVERNOR

PHONE: (406) 444-5580

(406) 444-2920 FAX:

COGSWELL BUILDING, ROOM C-211 **HELENA, MONTANA 59620-0901** 

August 27, 2010

Dear School Principal:

As you are aware, the Annual Immunization Status Report of Pupils Attending Montana Public and Private Schools (PHHS-106) must be mailed every year to the Immunization Program and the local health department or, if none, the local board of health, by the principal or designee in charge of the school.

The report must include: Section A: List each student with an incomplete immunization history and note the appropriate exemption or conditional status of each student. Section B: Must include the number enrolled in each grade, the number with 2nd dose MMR, and the number in grade 7 with 1 dose of tetanus/diphtheria containing vaccine (Td or Tdap).

We request the number in each grade with 3 doses of Hepatitis B vaccine.

Please address the completed PHHS-106 to the State of Montana, Department of Public Health and Human Services, Immunization Program, Cogswell Building, 1400 Broadway, P.O. Box 202951, Helena, Mt. 59620-2951.

#### This report is to be received no later than December 31, 2010.

The Immunization Program is very appreciative of your timely consideration in this important matter.

In addition to the reporting form, five separate documents are enclosed to assist you:

School Immunization Requirements, Medical Exemptions for Required Immunizations, Vaccine Names and Their Components, Affidavit of Religious Exemption and a conditional enrollment form.

If you have any questions concerning the report form or; immunizations in general, please call the Immunization Program at 444-5580 and ask to speak to one of the Health Service Specialists.

Sincerely,

Tim Horan

### DEPARTMENT OF PUBLIC HEALTH AND HUMAN SERVICES



**Brian Schweitzer GOVERNOR** 

Anna Whiting Sorrell
DIRECTOR

### STATE OF MONTANA

www.dphhs.mt.gov

PO BOX 4210 HELENA, MT 59604-4210 (406) 444-5622 FAX (406) 444-1970

September 2, 2010

### **Memorandum**

To: All Local Health Departments – Immunization Providers

From: DPHHS Immunization Program
Re: School Immunization Requirements

It has come to the attention of the DPHHS Immunization Program that clarification of statutes and rules related to selected school immunization requirements is needed. The intent of this memorandum is to provide the clarification necessary to ensure a consistent statewide approach can be can be taken, to minimize confusion among schools and immunization providers, and help assure the health of the student population.

Montana Code Annotated (MCA) 20-5-403 outlines general Immunization Requirements for school entry and attendance. The Administrative Rules of Montana (ARM) related to the above statute can be found at <a href="https://www.immunization.mt.gov">www.immunization.mt.gov</a>, and provide more detail related to school requirements.

The intent of the MCA for school entry immunization requirements is that all children attending school in Montana are appropriately immunized. The statute and rules outline the <u>minimum requirements</u> for school attendance. Additional vaccines are recommended by the ACIP and we encourage all providers to follow the ACIP recommendations. This will ensure that our school entry requirements are met, at a minimum, and will provide additional protection in our communities.

MCA 20-5-403 requires that the governing authority of any school (non post-secondary) may not allow a pupil to attend unless the person "has been immunized against diphtheria, pertussis, tetanus, poliomyelitis, rubella, mumps, and measles in the manner and with immunizing agents approved by the department, except that pertussis vaccination is not required for a person 7 years of age or older."

ARM 37.114.705 provides additional information regarding how vaccines immunizing against diphtheria, pertussis, and tetanus must be administered. The rule is clear regarding immunization requirements prior to entry into 7<sup>th</sup> grade but may not be clear regarding the requirement for older students.

After review, it is the Department of Public Health and Human Services legal interpretation that a pupil entering school, *at any grade level*, must have all immunizations required for school entry.

While the statute does not <u>require</u> a pertussis containing vaccine, it is strongly recommended that practitioners educate parents and administer DTaP, or TdaP rather than the bivalent Td/DT vaccine. Given the continued



increase in cases and outbreaks of pertussis among school aged children, it is imperative that children be appropriately immunized with a pertussis containing vaccine, as recommended by the ACIP.

Please continue to recommend the ACIP immunization schedule for all children, which will fulfill the immunization requirements for children entering school in Montana. At a minimum, students attending school, grades kindergarten through grade 12, must be immunized according to ARM (37.114.705), following age appropriate guidelines, regardless of the grade at which they enter the Montana school system.

If you have any questions or would like additional information, please contact the DPHHS Immunization Program at (406) 444-5580.

Thank you

Lisa Underwood Immunization Section Supervisor 1400 Broadway, Room C-211 P.O. Box 202951 Helena, MT 59601 (406) 444-0065 Lunderwood@mt.gov